B6 Summary (Official Form 6 - Summary) (12/14)

## United States Bankruptcy Court District of Massachusetts

In re Genesys Research Institute, Inc.

\_\_\_\_\_,

Case No. 15-12794

Chapter\_\_\_\_\_11

## **SUMMARY OF SCHEDULES - AMENDED**

Debtor

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	339,196.09		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	6		188,963.56	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	27		843,219.64	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
<ul> <li>I - Current Income of Individual Debtor(s)</li> </ul>	No	0			N/A
<ul> <li>J - Current Expenditures of Individual Debtor(s)</li> </ul>	No	0			N/A
Total Number of Sheets of ALL Schedu	les	41			
	To	tal Assets	339,196.09		
		L	Total Liabilities	1,032,183.20	

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se No. 13-12/94

Case 15-12794 Doc 128

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B 6 Summary (Official Form 6 - Summary) (12/14)

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## United States Bankruptcy Court District of Massachusetts

In re Genesys Research Institute, Inc.

Case No. 15-12794

Debtor

Chapter\_\_\_\_\_11

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

□ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

#### This information is for statistical purposes only under 28 U.S.C. § 159.

## Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

#### State the following:

Average Income (from Schedule I, Line 12)	
Average Expenses (from Schedule J, Line 22)	
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	

#### State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column	
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column	
4. Total from Schedule F	
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)	

B6F (Official Form 6F) (12/07)

In re Genesys Research Institute, Inc.

Case No. <u>15-12794</u>

Debtor

## AMENDED

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Hu	usband, Wife, Joint, or Community	ç	U N	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C N N	CONSIDERATION FOR CLAIM. IF CLAIM			P U T F	AMOUNT OF CLAIM
Account No.				<b>1</b> ₽	DATE		
A. Martucci and Sons 126 Newmarket Square Boston, MA 02118		-			D		
Account No.	+			-	-	-	525.00
ABC Moving Services, Inc. 33 Inner Belt Road Somerville, MA 02143		-					
Account No.				$\vdash$		-	272.14
Ado Jean-Noel 20 South Crescent Circuit Brighton, MA 02135		-		x	x	x	
Account No.							0.00
ADP P.O. Box 842875 Boston, MA 02284		-					240.00
			S	ubt	otal		
<u>26</u> continuation sheets attached			(Total of th				1,037.14

In re Genesys Research Institute, Inc.

	Case No.	15-12794
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Debtor

CREDITOR'S NAME,	С	Hu	sband, Wife, Joint, or Community	С	U	D	
Account No.	CODEBTOR	C M H			UNLIQUIDATED		AMOUNT OF CLAIM
Afshin Beheshti 57 Summer Street Medford, MA 02155		•	21		x		
Account No.							0.00
Aiqun Zhong 15 Walbridge Street, #3 Allston, MA 02134		-		x		x	
Account No.							8,405.00
Airgas Inc. P.O. Box 802576 Chicago, IL 60680		-					
Account No.	_	_		H			1,103.32
Airtest P.O. Box 7602 Nashua, NH 03060		-					
Account No.		_				_	1,505.00
Allen Institute for Brain Science 551 North 34th Street, #200 Seattle, WA 98103		-					38,808.00
Sheet no. <u>1</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		1	S (Total of th	ubto nis p			49,821.32

In re Genesys Research Institute, Inc.

Case No. <u>15-12794</u>	ase No. 15-12794	4
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Debtor

		1		1.	1	T =	,
CREDITOR'S NAME,	0 C	1 <sup>HI</sup>	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	18	N	P	
MAILING ADDRESS	DE	н	DATE CLAIM WAS INCURRED AND	N	L.	I SPUTED	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	H.	à	10	
AND ACCOUNT NUMBER	6	C	IS SUBJECT TO SETOFF, SO STATE.	N G	ΙU	F	AMOUNT OF CLAIM
(See instructions above.)	Ř			EN	D	Б	
Account No.				Ť	UNLIQUIDATED		
Allston-Brighton Substance Abuse						$\vdash$	-
Task Force		1-		1			
77 Warren Street, Room 330							
Brighton, MA 02135							
							31,190.00
Account No.	╉	$\vdash$		┢			
Amelanus Micros	1						
Andrew Wong							
153 Lake Shore Road, Apt. #4		1-		X	X	X	
Brighton, MA 02135							
							0.00
Account No.	╉	⊢		$\vdash$		┝	
	1						
Barry Latham II							
48 Norton Avenue	L .	-		x		x	
South Easton, MA 02375						$\left  \right $	
	E.						
							3,846.40
Account No.	1-	$\vdash$					
	1						
Beverly NG							
106 Bigelow Street		-		X	X	X	
Brighton, MA 02135							
							0.00
Account No.					_		
Bio-Rad Laboratories, Inc.							
Life Science Group		-					
P.O. Box 849740							
Los Angeles, CA 90084							
							135.00
Sheet no. 2 of 26 sheets attached to Schedule of			S	ubte	otal		
Creditors Holding Unsecured Nonpriority Claims			(Total of th				35,171.40
			(	r	0	<u>′</u> I	

In re Genesys Research Institute, Inc.

Case No13-12/94	Case	No.	15-12794
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Debtor

	С	Hu	Isband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	DATE CLAIM WAS DICUDDED AND		NLLQULDAT		AMOUNT OF CLAIM
Account No.				['	Ë		
BioLegend 9727 Pacific Heights Boulevard San Diego, CA 92121		-					
Account No.	-	_		-	-	-	145.00
Blue Cross/Blue Shield of Massachusetts P.O. Box 371318 Pittsburgh, PA 15250		-		x	x	x	
Account No.				$\vdash$			1.00
Boston Scientific Corporation 4100 Hamline Avenue, N 5-395 Saint Paul, MN 55112		-					
Account No.					-		17,713.00
Caitlin Abber 111 Westborune Terrace Apartment 2 Brookline, MA 02446		-					190.00
Account No.	-	_	<u> </u>				
Cassedra Enayo 20 Fellsview Avenue Medford, MA 02155		-		x	x	x	
							0.00
Sheet no. <u>3</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	Subt		- 1	18,049.00

In re Genesys Research Institute, Inc.

Debtor

CPEDITOP'S NAME	C 0	Н	usband, Wife, Joint, or Community	С	υ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	H W J C			UNL-QU-DATED	D S P U T E D	AMOUNT OF CLAIN
Account No.	1			Ľ	Ë		
Charles River Laboratories PO Box 27812 New York, NY 10087		-					
Account No.		-		$\vdash$			2,419.80
Chioma Madu 31 Doncaster Circle Lynnfield, MA 01940		-		x	x	x	0.00
Account No.				-	-		0.00
Christine Albert 50 Stonewood Lane Lynn, MA 01904		-					
Account No.							160.00
Christine Briggs 62 Meacham Road Somerville, MA 02144		-		x	x	x	
Account No.		_					0.00
Clare Lamont 93 E Central Street, #22 Natick, MA 01760		-		x	x	x	
							0.00
Sheet no. <u>4</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of ti	ubt nis p			2,579.80

In re Genesys Research Institute, Inc.

	Case	No.	1	<u>5-1</u>	2794
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Debtor

		U.	inchand Milfo Joint or Community	1-		-	
CREDITOR'S NAME,	CODEBT	HI	usband, Wife, Joint, or Community	CONFINGEN	N	D	
MAILING ADDRESS	E	H	DATE CLAIM WAS INCURRED AND	N	11	S P U T E	1
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	₽	W	CONSIDERATION FOR CLAIM. IF CLAIM	1Ľ.	Q	υ	
(See instructions above.)	0	J	IS SUBJECT TO SETOFF, SO STATE.	G	U I	I F	AMOUNT OF CLAIM
(See instructions above.)	R	ľ		Ĕ	D	D	
Account No.	Γ	Τ		ŢΫ	UNLIQUIDATED		
Claudia Aravia Silva				<b> </b>	D		
Claudia Araujo-Silva 7 Cedar Street							
		1-		X	Х	X	
Ashland, MA 01721							
							0.00
Account No.		$\uparrow$					
Colonial Life							
	L .						
Premium Processing	1	1-					
P.O. Box 903	L						
Columbia, SC 29202	E.						
							665.28
Account No.				Π			
Comeast							
Comcast	Ł.						
P.O. Box 1577		-					
Newark, NJ 07101							
							848.00
Account No.							
Connection Lab				11			
	1						
Attn: Emily Bhargva		•					
63 Irving Street					- 1	- 1	
Somerville, MA 02144							
							150.00
Account No.						Ť	
<b>0</b>							
Crown Uniform & Linen Service							
15 Technology Way		-					
Nashua, NH 03060							
							177.72
Sheet no. 5 of 26 sheets attached to Schedule of				ubtc	1	+	
Creditors Holding Unsecured Nonpriority Claims						- L	1,841.00
The second consecuted reality claims			(Total of the	ns p	age	۶L	

In re Genesys Research Institute, Inc.

Debtor

OPEDITOPIS MANTE	С	Н	usband, Wife, Joint, or Community	С	<u>u</u>	П	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H					AMOUNT OF CLAIM
DAH and Associates 33 Pond Avenue, STe, B1014 Brookline, MA 02445		-					-
Account No.	┢	$\vdash$		$\vdash$		-	5,000.00
David Goukassian 50 Auburn Street West Newton, MA 02465		-		x		x	
Account No.							48,655.20
David Horowitz 33 Pond Avenue, Apt. 1019 Brookline, MA 02445		-		x	x	x	0.00
Account No.	$\vdash$			$\vdash$	_		0.00
Dohoon Kim 185 Freeman Street, #848 Brookline, MA 02446		-		x	x	x	0.00
Account No.	$\square$			$\left  \right $	+	_	0.00
Donna Holm 21 Split Brook Road, #304A Nashua, NH 03060		-		x	x	x	
Sheet no. 6 of 26 sheets attached to Schedule of				ubte			0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t			- 1	53,655.20

In re Genesys Research Institute, Inc.

Case	No.	15-12794

Debtor

CREDITOR'S NAME	С	H	usband, Wife, Joint, or Community	С	υ	D	1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J H		ONTINGEN	UNLIQUIDATED		AMOUNT OF CLAIM
Account No.	Γ			ŢΤ.	E		
Dr. Michael Orlov 11 Garrison Road, #4 Brookline, MA 02445		-			D		
Account No.	┢	┢			-		60,000.00
Dreaming Code 55 Temple Place Boston, MA 02111		-					
Account No.	┝	-					85.00
DRX UC Watertown d/b/a Doctors Express 376 Arsenal Street Watertown, MA 02472		-					40.00
Account No.	$\vdash$			$\vdash$			40.00
Edward Rietman 8 Crawford Lane Nashua, NH 03063		-		x	x	x	
Account No.							0.00
Elizabeth Parsons 19 Essex Street Wakefield, MA 01880		-		x		x	
							6,305.87
Sheet no. <u>7</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of ti	ubt ubt			66,430.87

In re Genesys Research Institute, Inc.

Debtor

	I.c.	ц.	usband, Wife, Joint, or Community	To	1.1		· · · · · · · · · · · · · · · · · · ·
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C			UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Emcor Services P.O. Box 845286 Boston, MA 02284		-			ED		631.20
Account No.				$\vdash$			
EMD Millipore Corp. 25760 Network Place Chicago, IL 60673		-					
Account No.							1,197.00
Evelyn Martinez 14 Chelmsford Street Methuen, MA 01844		-		x		x	7 500 07
Account No.		_		$\left  \right $	-	_	7,582.67
FedEx P.O. Box 371461 Pittsburgh, PA 15250		-					50.44
Account No.	-	-			-	_	59.11
Fidelity Security Life Insurance/EyeMed FSL/EYEMED Premiums P.O. Box 632530 Cincinnati, OH 45263		-					143.97
Sheet no. <b>8</b> of <b>26</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S Status of the	ubto			9,613.95

In re Genesys Research Institute, Inc.

Case N	lo.	15-	12	2794
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Debtor

	Lc	1	alexand MRA Index Operation	16	1	1 -	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H U H U H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONF-NGUNZ	DNLOULDATED	DISPUTED	AMOUNT OF CLAIM
Account No.	$\square$			T	A T E		
Filaine Deronnette 1199SEIU Administrative Organizer St. Elizabeth's Medical Center 150 Mt. Vernon Street, Ste. 300 Boston, MA 02125		-		x	x		0.00
Account No.	⊢	┢		+	$\vdash$	$\vdash$	
GE Capital c/o Ricoh USA Prg P.O. Box 41564 Philadelphia, PA 19101		-					716.23
Account No.			For Notification Purposes	-			
GE Capital Information Technology Solutions, Inc. Attn: Bankruptcy Department P.O. Box 13708 Macon, GA 31208		-					0.00
Account No.		_		+	-		
Genesse Scientific 8430 Juniper Creek Lane San Diego, CA 92126		-					200.00
Account No.		_		$\left  \right $		_	308.28
Getinge USA 1265 Solutions Center Chicago, IL 60677		-					279.39
Sheet no. 9 of 26 sheets attached to Schedule of				 Subto	 otal		
Creditors Holding Unsecured Nonpriority Claims			(Total of t				1,303.90

In re Genesys Research Institute, Inc.

Case No. 15-127	94
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Debtor

		<u>ц</u> .	usband, Wife, Joint, or Community	1.0	10		1
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H H J C			Q	DISPUTED	AMOUNT OF CLAIM
Giannoula Lakka Klement 45 Hemenway Street, Apt. 1 Boston, MA 02115		-		x	$\uparrow$	x	
							0.00
Account No.				1			
Greg Shields 138 Sprague Street Dedham, MA 02026		-		×		x	
							2,830.72
Account No.							
Haley Grygiel 28 Bellamy Street Brighton, MA 02135		-		x	x	x	
Account No.				-			0.00
Harvard Pilgrim Healthcare P.O. Box 970050 Boston, MA 02297		-					04 200 00
Account No.							24,328.00
Helen Connolly 104 Beaufort Street Needham, MA 02492		-		x		x	
							15,333.33
Sheet no. <u>10</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	ubt 1is p			42,492.05

In re Genesys Research Institute, Inc.

Debtor

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	ļč	Н	lusband, Wife, Joint, or Community		: 1	1	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C N H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM					AMOUNT OF CLAIM
Account No.	Γ	Γ		Ť	Î		ſ	
Henry Schein Animal Health P.O. Box 223739 Pittsburgh, PA 15251		-						677 FF
Account No.	┢			+	+	┼	+	377.55
Hermine Poghosyan 4/10 Sari Tagh Street Yerevan001 Armenia		-		x	x		ĸ	
Account No.	L							0.00
Instech Laboratories, Inc. 5209 Milita Hill Road Plymouth Meeting, PA 19462		-						
Account No.	_			-		-		108.21
Irina Kareva 733 Kelton Street, Apt. #8 Allston, MA 02134		-		x	x	x		
Account No.				$\vdash$				0.00
J. Tyson McDonald, PhD 45 Stratford Road Newport News, VA 23601		-		x	x	x		
								0.00
Sheet no. <u>11</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of ti	ubt his r				485.76

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In re Genesys Research Institute, Inc.

	Case	No.	15-12794
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Debtor

#### AMENDED **SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS** (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR CONTINGENT UNLIQUIDATED D I S P U T CREDITOR'S NAME, MAILING ADDRESS н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM C J AND ACCOUNT NUMBÉR AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. Ė (See instructions above.) Account No. Janusz Weremowicz 750 West Roxbury Parkway X Х X Roslindale, MA 02131 0.00 Account No. Jennifer Salem-Russo **15 Josephine Avenue** XXX Rumford, RI 02916 0.00 Account No. Jillian Onufrak 21 Concord Street Х Х Natick, MA 01760 2,308.80 Account No. For Notification Purposes Joseph L. Kocibues 10 McTernan Street, #203 Cambridge, MA 02139 0.00 Account No. **Joseph Rowland** 93 Brayton Road XXX Brighton, MA 02135 0.00 Sheet no. 12 of 26 sheets attached to Schedule of Subtotal 2,308.80

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

In re Genesys Research Institute, Inc.

Debtor

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR UNLIQUIDATED CREDITOR'S NAME, CONFINGENT MAILING ADDRESS н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBÉR J C AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. (See instructions above.) Account No. Justin Wage 8 Melrose Street, Apt. 2 X X X Boston, MA 02116 0.00 Account No. Karl Manaat 76 Tyler Street, Apt. 3 XXX Boston, MA 02111 0.00 Account No. Kathleen Wilkie 72 Golden Avenue X | x | x Medford, MA 02155 0.00 Account No. Kevin Riordan 79 Gardena Street Х Х Brighton, MA 02135 39,343.20 Account No. Lauren Antonelli-Zullo **15 Hopedale Street** xxx Allston, MA 02134 0.00 Sheet no. 13 of 26 sheets attached to Schedule of Subtotal 39,343.20

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

In re Genesys Research Institute, Inc.

Debtor

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR UNLIQUIDATED DISPUTED CREDITOR'S NAME, CONTINGENT MAILING ADDRESS н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. Lauren Heyda 16 Sanderson Road xx X Lexington, MA 02420 0.00 Account No. LC Laboratories **165 New Boston Street** Woburn, MA 01801 241.00 Account No. Lee Ann Gearin Axford 40 Strathmore Road Haverhill, MA 01832 280.00 Account No. Life Technologies Corporation **BOA LockBox 12088 Collection Center Drive** Chicago, IL 60693 1,028.55 Account No. Lili Ma 20 Oxford Circle xxx Belmont, MA 02478 0.00 Sheet no. 14 of 26 sheets attached to Schedule of Subtotal

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

1,549.55

In re Genesys Research Institute, Inc.

Debtor

CREDITOR'S NAME,	C 0	н	usband, Wife, Joint, or Community	- C	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	C H	CONSIDERATION FOR CLAIM, IF CLAIM			I S P U T E D	AMOUNT OF CLAIM
				L	E D	L	
Lindsay Pothier 38 Wiley Street Wakefield, MA 01880		-		x		x	
Account No.							2,260.00
Lynch, Brewer, Hoffman and Fink, LLP 75 Federal Street, 7th Floor Boston, MA 02110		-					02 505 40
Account No.	Η	-		╀	$\vdash$	-	93,696.18
Lynch, Brewer, Hoffman and Fink, LLP 75 Federal Street, 7th Floor Boston, MA 02110		-		x			
Account No.				$\left  - \right $			51,564.20
Lynn Hlatky 12 Russell Road, Unit 401 Wellesley, MA 02482		-		x	x	x	
Account No.	_	_					0.00
Mamta Naidu 5 Nathan Place, Apt. 307 Concord, MA 01742		-		x	x	x	
Shooting 15 of 20 at the set 1 is 0 is the							0.00
Sheet no. <u>15</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	ubto nis p			147,520.38

In re Genesys Research Institute, Inc.

Debtor

	LC.	н	usband, Wife, Joint, or Community				
CREDITOR'S NAME,	C O D E B T	["	listena, trito, point, or community	-lö	N		
MAILING ADDRESS	ΙË	Н	DATE CLAIM WAS INCURRED AND	N N	I.L.	S	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM	-Hi	1a	บ	
AND ACCOUNT NUMBER	lo	10	IS SUBJECT TO SETOFF, SO STATE.	N G	U.		AMOUNT OF CLAIM
(See instructions above.)	Ř	ľ			D	Þ	
Account No.		Γ		Τ̈́	UNLIQUIDATED		
Mandell Law Offices				$\vdash$		-	-
Riverside Center							
		1		1^	^	X	
275 Grove Street, Ste. 2-400							
Auburndale, MA 02466							
Account No.	-			_			1.00
	-						
Maoyun Sun							
20 Oxford Circle				1x	l y	x	
Belmont, MA 02478				1	^	<b>^</b>	
Beinont, MA 02470							
							0.00
Account No.		1		╞			
Marcum LLP							
53 State Street, 38th Floor		-					
Boston, MA 02109		1					
							19,940.25
Account No.	-	$\vdash$		+			
Maria Bello		1					
51 Custer Street		-		x	X	x	
Brockton, MA 02301					-		
							0.00
Account No.		$\vdash$		$\left  \right $	_		
	-						
Marissa Hone							
15 Keswich Street, Unit 3		-		x	x	x	
Boston, MA 02215							
							0.00
						$\rightarrow$	0.00
Sheet no. <u>16</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	t			Subto			19,941.25
creations froming onsecured Nonpriority Claims			(Total of t	nıs p	age	e) [	

In re Genesys Research Institute, Inc.

Case	No.	15-12794
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Debtor

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community CODEBTOR CONTINGENT UNLLQULDATED CREDITOR'S NAME, MAILING ADDRESS н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, W CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. Mark D. Alpert, CPA **1399 Washington Street** Hanover, MA 02339 4,993.20 Account No. Mary Beth Ham 34 Thistle Road North Andover, MA 01845 160.00 Account No. Massachusetts Office of Victim Assistance 1 Ashburton Place, Ste. 1101 Boston, MA 02108 Unknown Account No. Maura Snow, MPA, SPHR **Great Brook Biotech** Senior Consultant, Human Resources 410 Old Stage Road Chelmsford, MA 01824 7,781.25 Account No. Megan Tavares 211 McGowan Street, Apt. 2 xxx Fall River, MA 02723 0.00 Sheet no. 17 of 26 sheets attached to Schedule of Subtotal

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

12,934.45

In re Genesys Research Institute, Inc.

Case	No.	15-12794
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Debtor

	10	н	usband, Wife, Joint, or Community				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C			UNLLQULDATED		AMOUNT OF CLAIM
Melissa Klumper 74 Newbern Avenue, #2 Medford, MA 02155		-		x	x	-	
							0.00
Account No. Michael Peluso 1846 Commonwealth Avenue, Apt. 9 Brighton, MA 02135		-		x	x	x	0.00
Account No.	┢	╞		+		_	0.00
Michele Penta P.O. Box 134 Milton Mills, NH 03852		-		x		x	
Account No.	┢			-			20,952.00
Michelle Apuzzio 177 Robert Road Dedham, MA 02026		-					
Account No.	$\vdash$			+		_	240.00
Mikhal Maslov 13 Dix Street Waltham, MA 02453		-		x	x	x	
Sheet no. <u>18</u> of <u>26</u> sheets attached to Schedule of				11		_	0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	Subt his p		- I.	21,192.00

In re Genesys Research Institute, Inc.

Debtor

		1	alter of MBE - Later and a second state	17	1	L e	
CREDITOR'S NAME,	CODEB	Hu	sband, Wife, Joint, or Community		N	P	
MAILING ADDRESS	Þ	н	DATE OF ADAMAG DIOUDDED AND	Ň	L.	s	
INCLUDING ZIP CODE,	15	W	DATE CLAIM WAS INCURRED AND	- LT			
AND ACCOUNT NUMBER	IΤ	J	CONSIDERATION FOR CLAIM. IF CLAIM	N N	Ŭ	Ť	AMOUNT OF CLAIM
(See instructions above.)	R	С	IS SUBJECT TO SETOFF, SO STATE.		Ľ	I SPUTED	
Account No.	1-	╞		- P	UNLIQUIDATED		
					D		
Mintz, Levin, Cohn, Ferris, Glovsky,					1		
P.C	1	-				1	
P.O. Box 4539							
Boston, MA 02212							
							200,953.00
Account No.		F	For Notification Purposes	╞			
Morgan Lewis							
	1						
One Federal Street		-					
Boston, MA 02110							
							0.00
Account No. 21955							
Outside GC LLC							
P.O. Box 482							
		-					
Sharon, MA 02067							
							464.05
Account No.	┥┤			┢	_		
PAR, Inc.							
16204 N. Florida Avenue		- 1					
Lutz, FL 33549							
Ediz, i E 33348							
							150.99
Account No.						Τ	
Paul Lucillo							
Paul Lucille							
15 Anthony Road		-			X	X	
Wayland, MA 01778							
	1						
							0.00
Sheet no. 19 of 26 sheets attached to Schedule of				Subt	otal	+	
Creditors Holding Unsecured Nonpriority Claims							201,568.04
			(Total of t	ms I	age	۶L	

In re Genesys Research Institute, Inc.

Debtor

		1		1 -	1	1.5	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H U U U	CONSIDERATION FOR CLAIM. IF CLAIM	CONFINGEN	UNLLQUIDATED	D I S P U T E D	AMOUNT OF CLAIM
Account No.	-			Т	T E D		
Philadelphia Insurance Company 1 Bala Plaza, Ste. 100 Bala Cynwyd, PA 19004		-					
Account No.	┝						7,216.78
Philip Hahnfeldt 12 Russell Road Unit 405 Wellesley, MA 02482		-		x	x	x	0.00
Account No.	Η	$\vdash$					
Pipette Calibration Services 36 Jaconnet Street Newton Highlands, MA 02461		-					0.004.00
Account No.	$\square$	_		$\vdash$			2,961.00
PLOS 1160 Battery Street, Ste. 100 San Francisco, CA 94111		-					
Account No.	$\square$	_				+	1,000.00
Robert Stemple 53 Kendali Road Boxborough, MA 01719		-		x		x	
							10,000.00
Sheet no. <b>20</b> of <b>26</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Si (Total of th	ubto tis p			21,177.78

In re Genesys Research Institute, Inc.

Case	No.	15-12794
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Debtor

#### AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

Husband, Wife, Joint, or Community UNLIQUIDATED CODEBTOR CREDITOR'S NAME, CONTANGENT MAILING ADDRESS Н DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, w CONSIDERATION FOR CLAIM. IF CLAIM AND ACCOUNT NUMBER J AMOUNT OF CLAIM IS SUBJECT TO SETOFF, SO STATE. С (See instructions above.) Account No. Sandra Charton 225 Northern Avenue, Apt. 718 XX X Boston, MA 02210 0.00 Account No. Sara Thornhill 9 Sabrina Court Methuen, MA 01844 160.00 Account No. Schuyler Grygiel 28 Bellamy Street x x x Brighton, MA 02135 0.00 Account No. Scott E. Perkins, VMD 365 Main Street Medfield, MA 02052 1,800.00 Account No. Sergi Nemstov **11 Guilford Street** Х Х Allston, MA 02134 480.77 Sheet no. 21 of 26 sheets attached to Schedule of Subtotal

Sheet no. <u>21</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

2,440.77

In re Genesys Research Institute, Inc.

Case	No.	1	5-	1	2	79	4	

Debtor

	Té	Ч	usband, Wife, Joint, or Community		10		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM		UNL-QUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.	$\Box$	Τ		٦Ŷ	TE		
Sharath Pankajavihar-Sasi 50 Broadlawn Park, Apt. 507 Chestnut Hill, MA 02467		-		x	t	x	
							7,850.53
Account No.							
Shiva Kalinga 17 Otis Street, #304 Cambridge, MA 02141		-		x	x	x	
							0.00
Account No.							
Sigma Aldrich P.O. Box 535182 Atlanta, GA 30353		-					
Account No.	╀╴	$\vdash$		+			421.00
Staples Advantage P.O. Box 415256 Boston, MA 02241		-					
Account No.		_					73.99
Stephanie Sturdahl 5 Beechcrest Street Warwick, RI 02888		-		x	x	x	0.00
Sheet no. 22 of 26 sheets attached to Schedule of			L	Subt	l		0.00
Creditors Holding Unsecured Nonpriority Claims			(Total of				8,345.52

In re Genesys Research Institute, Inc.

Case No.	15-12794
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Debtor

CREDITOR'S NAME,	C	1	lusband, Wife, Joint, or Community	C	Ιu	TD	<u> </u>
AILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H H	CONSIDERATION FOR CLAIM. IF CLAIM				AMOUNT OF CLAIM
Steven Hoffman 10 Harmony Lane North Easton, MA 02356		-		x	x	x	
Account No.	_						0.00
Steward Health Care System, LLC Corporate Headquarters 500 Boylston Street Boston, MA 02116		-		x	x	x	
Account No.				-			Unknown
Steward St. Elizabeth's Medical Center P.O. Box 417046 Boston, MA 02241		-					247.00
Account No.		_		Η	_	-	317.60
Swati Girdhani 5517 Wallace Place Fremont, CA 94538		-		x	x	x	0.00
Account No.		_		$\left  \right $	-	+	J.00
The Jackson Laboratory Lockbox Payments 90260 Collection Center Drive Chicago, IL 60693		-	÷.				554.70
Sheet no. 23 of 26 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of th	ubto ubto			872.30

In re Genesys Research Institute, Inc.

Debtor

CREDITOR'S NAME,	C	H	usband, Wife, Joint, or Community	Тс	Τu	Тр	T
Account No.	O D E B T O R	C J H			LIQ	ISPUTED	AMOUNT OF CLAIM
Thomas Dahl P.O. Box 404 Guilford, CT 06437		-		×	F	x	1
Account No.							11,538.48
Todd and Weld LLP One Federal Street Boston, MA 02110		-					
Account No.				$\vdash$			149.79
Trustees of Tufts College Tufts University 200 Westboro Road Attn: DEPH Farm North Grafton, MA 01536		-					766.00
Account No.				┝			
Tufts Medical Center co Frederick M. Frankhauser, JD MBA RPh 800 Washington Street (Tufts MC Box 817)		-		x	x	x	0.00
Boston, MA 02111 Account No.		_		$\vdash$	-	_	
Valerie Parkinson MS 50 Wareham Street Medford, MA 02155		-		x	x	x	
							0.00
Sheet no. <u>24</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			S (Total of t	lubt nis p			12,454.27

In re Genesys Research Institute, Inc.

Debtor

	С	Hu	sband, Wife, Joint, or Community	C	U	D	· · · · · · · · · · · · · · · · · · ·
CREDITOR'S NAME, MAILING ADDRESS	CODEBT	н			Ň	I S P U T E	
INCLUDING ZIP CODE,	Ē	W	DATE CLAIM WAS INCURRED AND	T	Ĩ	P	
AND ACCOUNT NUMBER	Ť		CONSIDERATION FOR CLAIM. IF CLAIM	N.	Ũ	Τ	AMOUNT OF CLAIM
(See instructions above.)	0 R	С	IS SUBJECT TO SETOFF, SO STATE.	GENT	I D	Ë D	AMOUNT OF CLAIM
Account No.	T			Ŧ	UN-LOULDAHED		
Verrill Dana LLP				-	D	_	
One Portland Square	I .			1			
Portland, ME 04112		[					
							16,891.36
Account No.							
VWR International LLC							
P.O. Box 640189		- 1					
Pittsburgh, PA 15264						- 1	
······································							
							87.39
Account No.				$\square$	-	+	
WB Mason Company, Inc.							
P.O. Box 981101		-					
Boston, MA 02298							
							540.43
Account No.					+	-	
Wendell Palmas							
P.O. Box 351071		-		X		X	
Brighton, MA 02135			Í		- 1		
Account No.	-	_				$\downarrow$	19,861.66
Winifred Nwangwu							
31 Doncaster Circle		-		x	x	x	
Lynnfield, MA 01940							
	1						
							0.00
Sheet no. 25 of 26 sheets attached to Schedule of	1	<u> </u>	S	ubto	tal	╉	07.000.01
Creditors Holding Unsecured Nonpriority Claims			(Total of th	is p	age		37,380.84

In re Genesys Research Institute, Inc.

Case No	15-12794
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Debtor

CREDITORIC MANUE	С	TF	Hus	sband, Wife, Joint, or Community		In	То	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	⊦ V J C	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLLQULDATE	SPUTED	AMOUNT OF CLAIN
Account No.					Ť	Ť		
World Courier, Inc. P.O. Box 842325 Boston, MA 02284		-				D		459.00
Account No.		┝	+		-	_	-	458.90
Xinhua Yan 15 Hartford Circle Andover, MA 01810		-			x		x	
								13,943.20
Account No.								
Xuefeng Gao 4 Square Henri Regnault Courbevoie France 92400		-			x	x	x	
								0.00
Account No.		Γ	t					
Yun Wang 497 Greendale Avenue Needham, MA 02492		-			x		x	
								17,307.00
Account No.								
		_						
Sheet no. <u>26</u> of <u>26</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				St (Total of th	ubto is p		- I	31,709.10
				(Report on Summary of Sch	Т	otal		843,219.64

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B7 (Official Form 7) (04/13)

#### United States Bankruptcy Court District of Massachusetts

In re	Genesys Research Institute, Inc.		Case No.	15-12794
		Debtor(s)	Chapter	11

## **STATEMENT OF FINANCIAL AFFAIRS - AMENDED**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT <b>\$216,911.00</b>	SOURCE <b>2015 - YTD</b>
\$5,000,655.23	2014
\$7,860,353.00	2013

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$28,176.67	2015 - Insurance Reimbursement

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		Document F	Page 31 of 42	

B7 (Official Form 7) (04/13)

AMOUNT	SOURCE
<b>\$6,417.50</b>	2015 - Insurance Reimbursement
\$9,861.25	2014 - Insurance Reimbursement

3. Payments to creditors



## Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS	DATES OF	AMOUNT PAID	AMOUNT STILL
OF CREDITOR	PAYMENTS		OWING

None b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Steward Health Care System, LLC Corporate Headquarters 500 Boylston Street Boston, MA 02116	DATES OF PAYMENTS/ TRANSFERS <b>4/16/2015</b>	AMOUNT PAID OR VALUE OF TRANSFERS <b>\$1,234,288.19</b>	AMOUNT STILL OWING <b>\$0.00</b>
See Attached List		\$0.00	\$0.00
None c. <i>All debtors:</i> List all payments made creditors who are or were insiders. (Marr	within <b>one year</b> immediately precedi- ied debtors filing under chapter 12 or	ng the commencement of this case chapter 13 must include payments	to or for the benefit of by either or both

L creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR Steward Health Care System, LLC Corporate Headquarters 500 Boylston Street Boston, MA 02116

DATE OF PAYMENT 4/16/2015 AMOUNT PAID **\$1,234,288.19**  AMOUNT STILL OWING \$0.00

4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT	NATURE OF	COURT OR AGENCY	STATUS OR
AND CASE NUMBER	DD 0 CERENIC		STATUSUK
AND CASE NUMBER	PROCEEDING	AND LOCATION	DISPOSITION

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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		Document P	age 32 of 42	

B7 (Official Form 7) (04/13) 3 CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION Lynn Hlatky, Ph. D. v. GeneSys Research Suffolk Superior Court Pending Institute, Inc. **3 Pemberton Square, 12th Floor** Suffolk Superior Court Civil Action No. Boston, MA 02108 SUCV2014-03733 Janusz Weremowicz v. David Horowitz, et al. West Roxbury District Court Pending West Roxbury District Court Small Claims No. 445 Arborwav 1406SC001998 Jamaica Plain, MA 02130 Steward Health Care System, LLC and Steward Suffolk Superior Court Resolved St. Elizabeth's Medical Center of Boston, Inc. v. 3 Pemberton Square, 12th Floor GeneSys Research Institute, Inc. Boston, MA 02108 Suffolk Superior Court Civil Action No. 14-2382BLS1 Cassedra Enayo v. GeneSys Research Institute, Civil **Massachusetts Commission Against Under Review** Inc. **Discrimination (MCAD)** with MCAD Docket No. 14BEM02173 One Ashburton Place, #601 Boston, MA 02108 Maria Bello v. GeneSys Research Institute, Inc. Civil Massachusetts Commission Against Under Review Docket No. 14BEM01801 **Discrimination (MCAD)** with MCAD One Ashburton Place, #601 Boston, MA 02108 None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately V preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS OF PERSON FOR WHOSE DESCRIPTION AND VALUE OF BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE PROPERTY 5. Repossessions, foreclosures and returns None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or V returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) DATE OF REPOSSESSION. NAME AND ADDRESS OF DESCRIPTION AND VALUE OF FORECLOSURE SALE, CREDITOR OR SELLER TRANSFER OR RETURN PROPERTY 6. Assignments and receiverships a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of None V this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) DATE OF NAME AND ADDRESS OF ASSIGNEE TERMS OF ASSIGNMENT OR SETTLEMENT ASSIGNMENT b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately None V preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS	NAME AND LOCATION		
OF CUSTODIAN	OF COURT	DATE OF	DESCRIPTION AND VALUE OF
OF CUSTODIAN	CASE TITLE & NUMBER	ORDER	PROPERTY

B7 (Offici	al Form 7) (04/13)			
4	7. Gifts			
None	aggregating less than \$100 per rec	tions made within <b>one year</b> immedi aggregating less than \$200 in value ipient. (Married debtors filing under not a joint petition is filed, unless the	per individual family memb chapter 12 or chapter 13 m	ber and charitable contributions
	E AND ADDRESS OF N OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
	8. Losses			
None	since the commencement of this	er casualty or gambling within <b>one y</b> <b>case.</b> (Married debtors filing under of tion is filed, unless the spouses are s	chapter 12 or chapter 13 mu	st include losses by either or both
	PTION AND VALUE PROPERTY	LOSS WAS CO	OF CIRCUMSTANCES A VERED IN WHOLE OR IN ANCE, GIVE PARTICULA	PART
	9. Payments related to debt cou	nseling or bankruptcy		
None	List all payments made or property concerning debt consolidation, reli preceding the commencement of the	y transferred by or on behalf of the d the funder the bankruptcy law or prep his case.	ebtor to any persons, includ aration of the petition in bar	ing attorneys, for consultation kruptcy within <b>one year</b> immediately
	AND ADDRESS PAYEE	DATE OF PAYN NAME OF PAYER THAN DEB	IF OTHER	AMOUNT OF MONEY OR DESCRIPTION AND VALUE
10 Conv	Parker and Associates /erse Place ster, MA 01890	7/14/2015		OF PROPERTY <b>\$12,000.00</b>
	10. Other transfers			
None	transferred either absolutely or as s	n property transferred in the ordinar security within <b>two years</b> immediate 13 must include transfers by either or etition is not filed.)	ly preceding the commence	ment of this case (Married debtors
NAME A	ND ADDRESS OF TRANSFEREE,		DESCRIBE PROPE	RTY TRANSFERRED
Steward Corpora 500 Boy	ELATIONSHIP TO DEBTOR I Health Care System, LLC Ite Headquarters Iston Street MA 02116	DATE 4/16/2015	AND VAI \$1,234,288.19	LUE RECEIVED
Corpora 500 Boy	l Health Care System, LLC te Headquarters Iston Street MA 02116	3/14/2014	\$62,577.28	
None	b. List all property transferred by t trust or similar device of which the	he debtor within <b>ten years</b> immedia debtor is a beneficiary.	tely preceding the commenc	ement of this case to a self-settled
NAME O DEVICE	F TRUST OR OTHER	DATE(S) OF TRANSFER(S)	AMOUNT OF MON VALUE OF PROPE IN PROPERTY	EY OR DESCRIPTION AND RTY OR DEBTOR'S INTEREST

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11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION Bank of America P.O. Box 15284 Wilmington, DE 19850	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Checking Account - (Account No. xxx2743) \$295,492.62 - transferred into TD Bank account payable account.	AMOUNT AND DATE OF SALE OR CLOSING <b>\$295,492.62 - 6/2015</b>
TD Bank, N.A.	Business Premier Checking - Operating Account (Account No. XXXX4053) - \$261.95	\$261.95 - 6/4/2015
TD Bank, N.A.	Business Premier Checking - Payroll Account - (Account No. XXXX8823) \$1,501.00	\$1,501.00 - 6/4/2015
TD Bank, N.A.	Business Savings (Account No. XXXX4522) - \$520.56	\$520.56 - 6/4/2015
Bank of America P.O. Box 15284 Wilmington, DE 19850	Checking Account (Account No. XXXX6895) \$1,234,288.19	\$1,234,288.19 - 4/17/2015

#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
			,

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
14. Property held for another	person	
None List all property owned by anoth	er person that the debtor holds or controls.	
NAME AND ADDRESS OF OWNER Steward Health Care System, LLC Corporate Headquarters 500 Boyiston Street Boston, MA 02116	DESCRIPTION AND VALUE OF PROPERTY See attached list	LOCATION OF PROPERTY

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15. Prior address of debtor

None If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

#### ADDRESS

#### NAME USED

DATES OF OCCUPANCY

## 16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

CITE MANE AND ADDRESS	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
SITE NAME AND ADDRESS	GOVERNMENTAL UNIT	NOTICE	LAW

# Noneb. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of HazardousImage: Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF	DATE OF	ENVIRONMENTAL
	GOVERNMENTAL UNIT	NOTICE	LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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#### 18. Nature, location and name of business

None a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME GeneSys Research Institute, Inc.	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS 736 Cambridge Street Suite CBR-402 Brighton, MA 02135	NATURE OF BUSINESS Massachusetts nonprofit corporation formed under MGL c. 180A in 2010. GRI provides health care and other related services for the benefit of patients and the community. GRI also conducts and/or facilitates the conduct of clinical and other research projects.	BEGINNING AND ENDING DATES <b>11/3/2010 to Present</b>
None b. Identify any	business listed in response to	subdivision a., above, that is "sir	ngle asset real estate" as defined i	n 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS **Robert Stemple** 53 Kendall Road Boxborough, MA 01719

Maria Bello 51 Custer Street Brockton, MA 02301 DATES SERVICES RENDERED 2/28/2014 to 7/24/2015

6/1/2001 to 2/28/2014

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None	b. List all firms or indiv of account and records,	iduals who withi or prepared a fin	n the <b>two years</b> immed ancial statement of the	liately preceding the filing of this bar debtor.	nkruptcy case have audited the books
NAME		ADDRESS	5	DATES SE	RVICES RENDERED
None ✓	c. List all firms or indiv of the debtor. If any of t	iduals who at the he books of acco	time of the commence ount and records are not	ment of this case were in possession available, explain.	of the books of account and records
NAME				ADDRESS	
None	d. List all financial insti issued by the debtor wit	tutions, creditors hin <b>two years</b> im	and other parties, inclu mediately preceding the	nding mercantile and trade agencies, ne commencement of this case.	to whom a financial statement was
NAME A	ND ADDRESS			DATE ISSUED	
·	20. Inventories				
None	a. List the dates of the la and the dollar amount ar	ist two inventorie nd basis of each i	es taken of your proper nventory.	y, the name of the person who super	vised the taking of each inventory,
DATE OF Ongoing Uncertai	-	INVENTO David Ho	RY SUPERVISOR rowitz	(Specify co	MOUNT OF INVENTORY st, market or other basis) s - \$Unknown
None	FINVENTORY	ress of the perso	NAM REC Davi 33 P	the records of each of the inventories IE AND ADDRESSES OF CUSTOR ORDS d Horowitz ond Avenue, Apt. 1019 okline, MA 02445	
Uncertai	n		12 R	n Hlatky ussell Road, Unit 401 esley, MA 02482	
	21. Current Partners,	Officers, Direct	ors and Shareholders		
None	a. If the debtor is a partn	ership, list the na	ture and percentage of	partnership interest of each member	of the partnership.
NAME A	ND ADDRESS		NATURE OF I	NTEREST	PERCENTAGE OF INTEREST
None	b. If the debtor is a corporce on trols, or holds 5 percent	oration, list all of ent or more of the	ficers and directors of t e voting or equity secu	he corporation, and each stockholder ities of the corporation.	who directly or indirectly owns,
David Ho 33 Pond Brookline	Avenue, Apt. 1019 e, MA 02445		TITLE <b>Member</b>		ND PERCENTAGE OWNERSHIP
10002 Ca	J. Newman alle de las Brisas ale, AZ 85255		Member		
	shteyn t 21st Street, Apt. 7G k, NY 10011		Member		

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NAME AND ADDRE Thomas Dahl 3730 Durham Road Guilford, CT 06437			TITLE Director		NATURE AND P. OF STOCK OWN	
Mark Zuroff 163 Cocasset Stree Foxboro, MA 02035		ł	Director			
David Horowitz 33 Pond Avenue, A Brookline, MA 0244		I	Director			
Robert Stemple 53 Kendall Road Boxborough, MA 0	1719		Treasurer a	nd Clerk		
22. Forme	r partners, officer	s, directors and s	areholders			
None a. If the deb	ton is a north such in	list and mombar	who with days	<b>6</b> 4		
commencer	nent of this case.	, list each meniber	who withdrey	w from the partner	ship within <mark>one year</mark> imme	ediately preceding the
commencer NAME	nent of this case.	ADDRESS		w from the partner:		ediately preceding the
NAME None b. If the det	nent of this case. otor is a corporation	ADDRESS	S r directors wł			F WITHDRAWAL
NAME None b. If the det	nent of this case. ptor is a corporation y preceding the cor SS et, Apt. 7G	ADDRESS n, list all officers, o nmencement of this	S r directors wł		DATE O	OF WITHDRAWAL
NAME None b. If the det immediately NAME AND ADDRE Boris Epshteyn 155 West 21st Street	nent of this case. otor is a corporation y preceding the cor SS et, Apt. 7G 1 Brisas	ADDRESS n, list all officers, o nmencement of this I	S r directors wł s case. FITLE		DATE O with the corporation termination DATE OF TERMI	OF WITHDRAWAL
NAME None b. If the det immediately NAME AND ADDRE Boris Epshteyn 155 West 21st Stree New York, NY 1001 Charles J. Newman 10002 Calle de las E	nent of this case. otor is a corporation y preceding the cor SS et, Apt. 7G 1 Brisas	ADDRESS n, list all officers, o nmencement of this 1	S r directors wh s case. FITLE <b>Director</b>		DATE O with the corporation termina DATE OF TERMI 6/26/2014	OF WITHDRAWAL
NAME None b. If the det immediately NAME AND ADDRE Boris Epshteyn 155 West 21st Stree New York, NY 1001 Charles J. Newman 10002 Calle de las E Scottsdale, AZ 8529 Thomas Dahl 3730 Durham Road	nent of this case. otor is a corporation y preceding the cor SS et, Apt. 7G 1 Brisas 55	ADDRESS n, list all officers, o nmencement of this I	S r directors wh s case. TITLE <b>Director</b> <b>Director</b>	nose relationship w	DATE O with the corporation terminal DATE OF TERMI 6/26/2014 5/8/2015	OF WITHDRAWAL

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR See Attached List

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

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24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

#### NAME OF PENSION FUND MATC Plan #270475 - 401(k) Profit Sharing Plan and Trust ADP Retirement Service Plan #686238

TAXPAYER IDENTIFICATION NUMBER (EIN)

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I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date Deptemper 28, 2015

Signature 21 Charles J. Newman, a/k/a C.J. Newman Member, Duly Authorized

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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## United States Bankruptcy Court District of Massachusetts

In re Genesys Research Institute, Inc.

Debtor(s)

Case No. 15-12794 Chapter 11

# VERIFICATION OF AMENDED CREDITOR MATRIX

I, Charles J. Newman, a/k/a C.J. Newman, the Member, Duly Authorized of the corporation named as the debtor in this case, hereby

verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: September 28, 2015

Charles J. Newman, a/k/a C.J. Newman as a Member of GeneSys Research Institute, Inc., Duly Authorized Signer/Title Outside GC LLC P.O. Box 482 Sharon, MA 02067